

## Inspector View Only - Navy Construction / Facilities Management Invoice

Some document values differ from those in EDA. Click on the View Validation Warnings link to view.

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## [-] Document Information

Contract Number Type	Contract Number	Delivery Order	Reference Procurement Identifier	Effective Date	Construction	Fixed Price
Non-DoD Contract (FAR)	N4008017C0505			2017/09/25	Y	Y
Invoice Number	Invoice Date		Final Invoice?		Invoice Received Date	
0505006	2019/02/08		Y		2019/02/08	
<b>Discounts</b>						
NET : 30						
Summary of Detail Level Information			Deduction Amount (\$)	Retention Amount (\$)	Total (\$)	
1 CLIN/SLIN(s)			0.00	0.00	25,477.00	

## [-] Line Item Information

Document Total		Deduction Amount		Retention Amount		Govt Approved Total																							
25,477.00		0.00		0.00		25,477.00																							
Item No.	PR Number	Qty. Provided	Unit of Measure	UoM Code	Unit Price (\$)	CLIN Amount (\$)	Approved Amount (\$)																						
0001	0505006	1	Lump Sum	LS	(b) (4)		25,477.00																						
Description					Recommended Deduction Amount (\$)																								
Final Invoice																													
Line Total:		Deduction Amount	Retention Amount	ACRN Approved Amount																									
		0.00	0.00	25,477.00																									
<div><table><tr><th>Sub-Line No.</th><th>AAA</th><th>TFO</th><th>SDN</th><th>ACRN</th></tr><tr><td>000101</td><td>056521</td><td>N</td><td>N4208217RC085CD</td><td>AA</td></tr><tr><td colspan="2">ACRN Amount</td><td>Deduction Amount</td><td>Retention Amount</td><td colspan="2">ACRN Approved Amount</td></tr><tr><td colspan="2">25,477.00</td><td></td><td></td><td colspan="2">25,477.00</td></tr></table></div>								Sub-Line No.	AAA	TFO	SDN	ACRN	000101	056521	N	N4208217RC085CD	AA	ACRN Amount		Deduction Amount	Retention Amount	ACRN Approved Amount		25,477.00				25,477.00	
Sub-Line No.	AAA	TFO	SDN	ACRN																									
000101	056521	N	N4208217RC085CD	AA																									
ACRN Amount		Deduction Amount	Retention Amount	ACRN Approved Amount																									
25,477.00				25,477.00																									

## [-] LLA Information

LLA Level : ACRN

Item Number	Sub Line	ACRN	
0001	000101	AA	
Document Record Reference ID	Agency Accounting ID	ACRN	
N4208217RC085CD	056521	AA	
Agency Qualifier Code	Defense Agency Allocation Recipient	Cost Code	Department Indicator
DD			
Job/Work Order Code	Cost Allocation Code	Transfer from Department	Sub-Allotment Recipient
Classification Code	Fiscal Year Indicator	Work Center Recipient	DoD Budget Accounting Classification Code
Basic Symbol Number	Major Reimbursement Source Code	Limit/Sub Head	Reimbursement Source Code
Fund Code	Customer Indicator/MPC	Fund Org Admin Code	Object Class
IFS Number	Allotment Serial Number	Government Public Sector ID	Transaction Type
Activity Address Code	Foreign Currency Code	Program/ Planning Code	Program Element Code
FMS Case Number (1-3)	FMS Case Number (4-5)	FMS Case Number (6-8)	Project Task/Budget Subline
Special Interest/Program Cost			

## [-] Address Information

Prime Contractor			
CAGE Code	DUNS	DUNS + 4	Extension
7TAP7	053374481		
Activity Name 1			
LANSDOWNE CONSTRUCTION LLC			
Activity Name 2			
Activity Name 3			
Address 1			
1741 BUSINESS CENTER DRIVE STE 120			
Address 2			
Address 3			
Address 4			
City	State	Zip	
RESTON	VA	20190	
Country	Military Location Description		
USA			

Administered By			
DoDAAC			
N44201			
Activity Name 1			
NAVFAC WASHINGTON PWD			
Activity Name 2			
Activity Name 3			
Address 1			
ANNAPOLIS FEAD			
Address 2			
181 WAINWRIGHT ROAD			
Address 3			
Address 4			
ANNAPOLIS MD 21402			
City	State	Zip	
ANNAPOLIS	MD	21402	
Country	Military Location Description		

Inspect By			
DoDAAC	Extension		
N44201			
Activity Name 1			
NAVFAC WASHINGTON PWD			
Activity Name 2			
Activity Name 3			
Address 1			
ANNAPOLIS FEAD			
Address 2			
181 WAINWRIGHT ROAD			
Address 3			
Address 4			
ANNAPOLIS MD 21402			
City	State	Zip	
ANNAPOLIS	MD	21402	
Country	Military Location Description		

Accept By			
DoDAAC	Extension		
N44201			
Activity Name 1			
NAVFAC WASHINGTON PWD			
Activity Name 2			
Activity Name 3			
Address 1			
ANNAPOLIS FEAD			
Address 2			
181 WAINWRIGHT ROAD			
Address 3			
Address 4			
ANNAPOLIS MD 21402			
City	State	Zip	
ANNAPOLIS	MD	21402	
Country	Military Location Description		

Local Processing Official			
DoDAAC	Extension		
N44201			
Activity Name 1			
NAVFAC WASHINGTON PWD			
Activity Name 2			
Activity Name 3			
Address 1			
ANNAPOLIS FEAD			
Address 2			
181 WAINWRIGHT ROAD			

Payment Official			
DoDAAC	Extension		
N68732			
Activity Name 1			
DEFENSE FINANCE AND ACCOUNTING SERV			
Activity Name 2			
Activity Name 3			
Address 1			
CLEVELAND-NORFOLK ACCOUNTS PAYABLE			
Address 2			
1240 E 9TH ST SPS30 ACCTS PAYABLE			

## Address 3

## Address 4

ANNAPOLIS MD 21402

City	State	Zip
ANNAPOLIS	MD	21402
Country	Military Location Description	

## Address 3

## Address 4

CLEVELAND OH 44199-2001

City	State	Zip
CLEVELAND	OH	44199-2001
Country	Military Location Description	

## Issue By

DoDAAC

N44201

## Activity Name 1

NAVFAC WASHINGTON PWD

## Activity Name 2

## Activity Name 3

## Address 1

ANNAPOLIS FEAD

## Address 2

181 WAINWRIGHT ROAD

## Address 3

## Address 4

ANNAPOLIS MD 21402

City	State	Zip
ANNAPOLIS	MD	21402
Country	Military Location Description	

## [-] Misc Information

## Initiator

<b>Name:</b>	<b>Date of Action:</b>	<b>Phone #:</b>	<b>DSN:</b>
Sharon Dietze	2019/02/08 0926 MST	703-464-1003	
<b>Email:</b>		<b>Title:</b>	<b>Action(s):</b>
sdietze@lansgc.com		Vice President	[Saved]
<b>Org Email:</b>			
sdietze@lansgc.com			
<b>Attachments:</b>			
Inv006_Cover_Sheet_Feb_2019.pdf		<a href="#">View Attachment</a>	
INV_06_Feb_2019_Cont_Perf_Statement_Form_7300_31.pdf		<a href="#">View Attachment</a>	
<b>Comments:</b>			

## Initiator

<b>Name:</b>	<b>Date of Action / IRD:</b>	<b>Phone #:</b>	<b>DSN:</b>
Sharon Dietze	2019/02/08 0936 MST / 2019/02/08 0936 MST	703-464-1003	
<b>Email:</b>		<b>Title:</b>	<b>Action(s):</b>
sdietze@lansgc.com		Vice President	[Submitted, Web, Stand Alone]
<b>Org Email:</b>			
sdietze@lansgc.com			
<b>Attachments:</b>			
<b>Comments:</b>			

## Inspector

<b>Name:</b>	<b>Date of Action:</b>	<b>Phone #:</b>	<b>DSN:</b>
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<b>Email:</b> prakash.kanthan@navy.mil	<b>Title:</b> General Engineering and Architecture	<b>Action(s):</b> [Inspected]
<b>Org Email:</b> InvoicePWDUSNA@navy.mil		
<b>Attachments:</b>		
<b>Comments:</b>		

**Acceptor**

<b>Name:</b> Shanekia Robinson	<b>Date of Action:</b> 2019/03/01 1113 MST	<b>Phone #:</b> 410-293-3162	<b>DSN:</b>
<b>Email:</b> shanekia.robinson1@navy.mil		<b>Title:</b> Management and Program Analysis	<b>Action(s):</b> [Accepted]
<b>Org Email:</b> InvoicePWDUSNA@navy.mil			
<b>Attachments:</b>			
<b>Comments:</b>			

**Local Processing Official**

<b>Name:</b> Richard Rawlings	<b>Date of Action:</b> 2019/03/04 0457 MST	<b>Phone #:</b> (410)-293-3188	<b>DSN:</b> 281-3188
<b>Email:</b> richard.n.rawlings@navy.mil		<b>Title:</b> Contracts Specialist	<b>Action(s):</b> [Certified, Processed via EDI]
<b>Org Email:</b> InvoicePWDUSNA@navy.mil			
<b>Attachments:</b> Final.pdf		<a href="#">View Attachment</a>	
<b>Comments:</b>			

As the Contracting Officer I certify that this payment of \$25,477.00 is the final payment for this contract to this contractor and its associated debtors as per the U.S. Bankruptcy Court, District of Eastern Virginia, Case #18-11754-KHK. If you have any questions, please contact myself at 410-293-1388.

**Payment Official**

<b>Name:</b>	<b>Date of Action:</b> 2019/03/04 2252 MST	<b>Phone #:</b> Phone number 855-608-3975, Option 1 - Pay Status, Option 2 - Verify Payment Received Option 3 - WAWF Invoice Status	<b>DSN:</b>
<b>Email:</b>		<b>Title:</b>	<b>Action(s):</b> [Processed via EDI]
<b>Org Email:</b> DNFWAWF2@DFAS.MIL			
<b>Attachments:</b>			
<b>Comments:</b>			

Document was processed by the entitlement system. FOR PMT ON 190305-ESTPD 190318 AMT CERT \$25477.00 DFAS Customer Service Telephone Number: Phone number 855-608-3975, Option 1 - Pay Status, Option 2 - Verify Payment Received Option 3 - WAWF Invoice Status

**Payment Official**

<b>Name:</b>	<b>Date of Action:</b> 2019/03/09 0135 MST	<b>Phone #:</b>	<b>DSN:</b>
<b>Email:</b>		<b>Title:</b>	<b>Action(s):</b> [Paid]
<b>Org Email:</b> DNFWAWF2@DFAS.MIL			
<b>Attachments:</b>			
<b>Comments:</b> Paid			

[\[-\] Workflow Information](#)**Contractor Certification**

I hereby certify, to the best of my knowledge and belief, that --

(1) The amounts requested are only for performance in accordance with the specifications, terms, and conditions of the contract:

(2) All payments due to subcontractors and suppliers from previous payments received under the contract have been made, and timely payments will be made from the proceeds of the payment covered by this certification, in accordance with subcontract agreements and the requirements of chapter 39 of Title 31, United States Code;

(3) This request for progress payments does not include any amounts which the prime contractor intends to withhold or retain from a subcontractor or supplier in accordance with the terms and conditions of the subcontract; and

(4) This certification is not to be construed as final acceptance of a subcontractor's performance.

Signature Date  
2019/02/08

Sharon Dietze

Signature of Contractor Representative

**ACTION BY: N44201**

☒ Recommend Approval

☐ Recommend Reduced Amount

☐ Recommend Rejection

Inspection Date

2019/02/15

Signature Date

2019/02/15

Has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents

Prakash Kanthan

Signature Of Authorized Government Representative

**ACTION BY: N44201**

Approved Amount : \$25,477.00

☒ Approve

☐ Approval with Deductions

☐ Reject to Initiator

Acceptance Date

2019/02/15

Signature Date

2019/03/01

Has been made by me or under my supervision and they conform to contract, except as noted herein or on supporting documents

Shanekia Robinson

Signature Of Authorized Government Representative

**ACTION BY: N44201**

☒ Document Certified

☐ Document Rejected

Signature Date

2019/03/04

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

Richard Rawlings

Signature Of Authorized Government Representative

**ACTION BY: Payment Official**

☒ Document Accepted

☒ Document Processed

☐ Document Rejected

☐ Document Suspended

☐ Document Available For Recall

☐ Document in MyInvoice"

☒ Document Paid

